



## Building & Enforcement Services

2345 Providence Blvd • Deltona, FL 32725

Permitting: (386) 878-8650 • (386) 878-8660

Zoning: (386) 878-8665 – Fax (386) 878-8651

E-mail: Permitting@deltonafl.gov

PERMIT NO.: \_\_\_\_\_ - \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

# CITY OF DELTONA

## APPLICATION FOR TREE REMOVAL PERMIT

(Land Development Code, Ordinance 98-26, Article II Tree Permits)

### I. TYPE OF TREE REMOVAL APPLICATION *(Check one):*

- ☐ Concurrent with Final Site Plan/Development Order \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Section 98.29(a))
- ☐ Without Development Order Review (Section 98.29(a) (2))
- ☐ Application option (Section 98.29(a) (3))
- ☐ In Connection with Building or Related Improvements (Section 98.29(a) (4))
- ☐ Historic and specimen trees (Section 98.29(a) (5))

### II. SUBJECT PROPERTY INFORMATION:

Property Owner's Name(s): \_\_\_\_\_

Owners Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address or Location: \_\_\_\_\_

Tax Parcel #'s: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Size: \_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Size: \_\_\_\_\_

or \_\_\_\_\_ See attached list of properties *(multiple owners and/or properties)*

### III. ALL COMMUNICATION CONCERNING THIS APPLICATION WILL BE DIRECTED TO THE UNDERSIGNED *(If a corporation, please note contact person):*

Applicant's Name: \_\_\_\_\_

Applicant's Status: \_\_\_ Owner; \_\_\_ Attorney for Owner; \_\_\_ Agent for Owner; \_\_\_ Contract Purchaser

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ - E-mail: \_\_\_\_\_

Required fees must be paid at the time of filing. The applicant is responsible for submitting all information and exhibits in such form and completeness that will allow all reviewers to judge whether or not the subject application complies with all applicable regulations. **If the applicant is not the property owner, proper authorization must accompany this application.**

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### IV. ITEMS REQUESTED TO BE SUPPLIED AT THE TIME OF SUBMISSION:

\_\_\_ 1 copy of Tree Survey [recommended Scale 1"=20'] with trees by location, common name and DBH.

\_\_\_ Existing trees to be removed, to be relocated, or to be retained

\_\_\_ Replacement stock to be planted

\_\_\_ Trees to be maintained

\_\_\_ Trees to be maintained requiring protection

\_\_\_ Detail of and method of protection

\_\_\_ Existing and proposed utility easements,

\_\_\_ Existing and proposed site

improvements

\_\_\_ Legal Description(s) and Parcel Number(s)

\_\_\_ Removal and replacement calculations

\_\_\_ Reason for removal if not concurrent with FSP

\_\_\_ Scale, North Arrow, and Legend

\_\_\_ Identification of Historic and Specimen trees

\_\_\_ If not already on site plan, identify natural vegetation retention areas and tree protection areas



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